

ISSUE SLIP STAPLE AREA (for additional cross references)

POS	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	2/1/01
FORMALITY REVIEW	Rm	181	02-15-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4/25/00
2	✓	✓	9/15/00
3	✓	✓	5/12/00
4	✓	✓	10/18/00
5	✓	✓	1/15/01
6	✓	✓	5/3/00
7	✓	✓	1/16/01
8	✓	✓	1/16/01
9	✓	✓	1/16/01
10	✓	✓	1/16/01
11	✓	✓	1/16/01
12	✓	✓	1/16/01
13	✓	✓	1/16/01
14	✓	✓	1/16/01
15	✓	✓	1/16/01
16	✓	✓	1/16/01
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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